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## APPLICANTS

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\*\* CONTINUING DATA *None*\*\* FOREIGN APPLICATIONS *✓*  
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Verified and Acknowledged Examiner's Signature <i>✓</i>	Initials				

## ADDRESS

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## TITLE

Method, apparatus, and recording medium for processing tomographic image

FILING FEE RECEIVED 740	FEES: Authority has been given in Paper No. _____ to charge/credit DEPOSIT ACCOUNT No. _____ for following:	<input checked="" type="checkbox"/> All Fees <input checked="" type="checkbox"/> 1.16 Fees ( Filing ) <input checked="" type="checkbox"/> 1.17 Fees ( Processing Ext. of time ) <input checked="" type="checkbox"/> 1.18 Fees ( Issue ) <input checked="" type="checkbox"/> Other _____ <input checked="" type="checkbox"/> Credit
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